	PATENT APPLICATION FEE DETERMINATION REC								Application or Docket Number			
_	PAIEN		ION FEE			TION REC	ORC		106	23	I No	Who
		CLAIMS	AS FILE	- PART	1			SMALL	ENTITY	-		
r	TOTAL OLAM		(Colu	(Column 1) (Column 2)			TYPE				OTHER THA OR SMALL ENTI	
L	TOTAL CLAIM						RATE	FE		RATE		
L	FOR	NUMBI	NUMBER FILED		NUMBER EXTRA		BASIC FI	EE 395.	∞ _^	BASIC FE		
Ŀ	TOTAL CHARG	EABLE CLAIMS		ninus 20=		• 1		X\$ 9=	1	-		+
1	NDEPENDENT		minus 3 =		• 4 15				_ 0	1	<u> </u>	
Ā	AULTIPLE DEPE						X44=		_ 0	7 X88=	1	
Ŀ					·			+150=	1	o	+300=	
•	if the difference	e in column 1 i	s less than	zero, enter	"0" in	column 2	1	TOTAL		Of	TOTAL	200
		CLAIMS AS		D - PART	r ii	·				J ~ '		THAN
Ī.	1	(Column 1)	————	(Colum		(Column 3)		SMALL	ENTITY	OR		
AT A		REMAINING AFTER		NUMB	ER	PRESENT		RATE	ADDI- TIONA		BATE	ADDI
AMENDMENT		AMENDMENT		PAID F		EXTRA			FEE		RATE	TION
	Total	1.32	Minus	- 3	8	-	+	X\$ 9=	1	OR	X\$18=	
Z	Independent	A P	Minus	1 *** 3		=		-X44=			You	
<u>-</u>	Trinoi PRES	ENTATION OF M	IULTIPLE DE	PENDENT	CLAIM		1		 	-IOR		
	•	· .				•	L	+150=		OR	<u></u>	<u> </u>
		(Column 1)					AI	TOTAL DDIT. FEE		OR	ADDIT. FEE	
AMENDMENT B		CLAIMS	T	(Columi	ST	(Column 3)		<u>.</u>			F	
		REMAINING AFTER		PREVIOU	JSLY	PRESENT EXTRA		RATE	addi- Tional		RATE	ADDI- TIONAI
	Total	AMENDMENT	Minus	PAID FO	OR		-		FEE	4		FEE
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		NTATION OF MU	1	PENDENT C	1 414 1	<u>-</u>	i	X44=		OR	X88=	i - Hrwan
				LITUENT	LAIM			150=		1	.000	
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		(Column 1)		(Oct.)	٥١		AD	DIT. FEE		JOR ,	ADDIT. FEE	·
Τ,		CLAIMS		(Column HIGHES	T	(Column 3)				, .		•
: L		REMAINING AFTER		NUMBE: PREVIOUS		PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI-
	Total	AMENDMENT *	A A!	PAID FO	R				FEE		ivie	TIONAL FEE
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		1	Minus	SAIDENT OF			\ \	44=			X88=	<u> </u>
<u>.</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H			OR		·
H	the entry in colum	n 1 is less than the	entry in colur	nn 2, write "0"	in colur	mn 3.	L+	50=	<u>. · </u>	OR	+300=	
··if	the "Highest Num	iber Previously Pail	d For IN THIS	SPACE is les	s than 2	20, enter *20.*	ADD	TOTAL IT. FEE		OR A	TOTAL DDIT, FEE	
T	he "Highest Numb	er Previously Paid	For (Total or	Independent)	is the hi	ighest norm er fo	ound is	 In the appro	opriate box	in colu	mal	
		•						• • • •	7	.,,		